PTO/SB/08A(10-01)
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US Peterl & Trademark Office; U.B. DEPARTMENT OF COMMERCE

Substitute for form 1449A/PTO	Complete if Known	equired to respond to a collection of information unless it contains a valid DMB control number
INFORMATION DISCLOSURE	Application Number	10/830,189
STATEMENT BY APPLICANT (Use as many sheets as necessary)	Filing Date	April 21, 2004
	First Named Inventor	Kelleher, Brian
SEP 1 6 2004 W	Group Art Unit	3736
20 10 20 20	Examiner Name	Unknown
Sheet 1 of 4	Attorney Docket No: 8	0100.028US2

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INFORMATION DISCLOSURE STATEMENT BY APPLICANT	Application Number	10/830,189
(Use as many sheets as necessary)	Filing Date	April 21, 2004
	First Named Inventor	Kelleher, Brian
	Group Art Unit	3736
	Examiner Name	.Unknown
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INFORMATION DISCLOSURE STATEMENT BY APPLICANT	Application Number	10/830,189
(Use as many sheels as necessary)	Filing Date	April 21, 2004
	First Named Inventor	Kelleher, Brian
	Group Art Unit	3736
	Examiner Name	Unknown
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Substitute for form 1449A/PTO	Complete if Known	required to respond to a collection of information unless it contains a yield QMB control number.
INFORMATION DISCLOSURE STATEMENT BY APPLICANT	_ Application Number	10/830,189
(Use as many sheets as necessary)	Filing Date	April 21, 2004
	First Named Inventor	Kelleher, Brian
	Group Art Unit	3736 .
	Examiner Name	Unknown
Sheet 4 of 4	Attorney Docket No: 8	30100.028US2

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Substitute for form 1449APTO INFORMATION DISCLOSURE	Complete if Known	required to mapping to a collection of information lutters & contains a yield QMB control number
	<b>Application Number</b>	10/830,189
STATEMENT BY APPLICANT (Use as many sheets as necessary)  OIP	Filing Date	April 21, 2004
	First Named Inventor	Kelleher, Brian
la Nov. §	Group Art Unit	3736
NOV. J. Jones &	Examiner Name	Unknown
Sheet 1 of 2	Attorney Docket No: 0	)28US2

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Sheet 2 of 2	Attorney Docket No: 028US2		
	Examiner Name	Unknown	
	Group Art Unit	3736	
	First Named Inventor	Kelleher, Brian	
(Use as many sheets as necessary)	Filing Date	April 21, 2004	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT	<b>Application Number</b>	10/830,189	
Substitute for form 1449APTO	Complete if Known		

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Examiner Initials*	Cite No 1	include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T
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